



Date: November 30, 2004

Subject: The National Institutes of Health (NIH) Environmental Management System (EMS) Self-Declaration Protocol

Purpose:

The purpose of this protocol is to identify the NIH's procedures for implementing and maintaining a viable EMS in accordance with Executive Order 13148, *Greening the Government through Environmental Management*, and the HHS EMS Policy Framework. As required by the Office of the Federal Environmental Executive's *Federal EMS Agency Self-Declaration Protocol for Appropriate Federal Facilities*, this protocol is designed to satisfy the following principles:

1. Result in accurate and reliable information on the NIH's progress as it adopts improved business practices associated with EMS implementation.
2. Focus responsibility for initial EMS verification and on-going quality assurance.
3. Provide the NIH flexibility to implement EMS in ways that support its overall public mission.
4. Provide an independent basis for verifying the status of the NIH's EMS, and appropriately communicating that status to internal and external stakeholders.
5. Ensure that system verification is more than a documentation review, and that the effectiveness of implementation is also reviewed.
6. Use existing EMS elements where possible so that self-declaration becomes an integral part of the NIH's EMS.

Protocol:

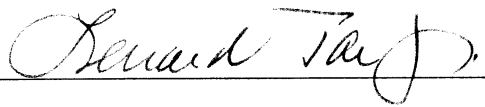

- a. As directed by the *HHS EMS Policy Framework*, the NIH will use the ISO 14001 as an evaluation guide for evaluating its EMS. Other documents that the NIH may use to assist in this process may include:
 - Appendix A, The Global Environmental Management Initiative (GEMI), "*ISO 14001 Environmental Management System Self-Assessment Checklist*"
 - Appendix B, "*Oregon Green Permits Program Guide -- Attachment B: EMS Description and References.*"
 - Appendix C, The National Aeronautics and Space Administration's "*Environmental Functional Review Checklist.*"
- b. The NIH will perform initial self-declaration in order to meet the December 31, 2005 set by Executive Order 13148. After the initial self-declaration, the NIH will self-declare its

EMS every three years. The NIH may initially use independent consultants to audit and verify the EMS. After the initial self-declaration, the NIH may set up a reciprocal auditing process with other biomedical research organizations within HHS. The NIH would assist in auditing another OPDIV, while that OPDIV would send members to audit the NIH. This auditing approach would be an excellent opportunity for the NIH to learn about the EMS approaches taken by similar organizations. It is possible that other Federal biomedical research organizations in the Washington DC area may be invited to be involved in this auditing process also (for example, the NNMC, Walter Reed, Ft. Detrick).

Audit personnel will comprise a range of backgrounds that include experience in the environmental field, facilities, maintenance, operations, biomedical research, and ISO 14001. After each audit, the results will be sent to the NIH EMS Committee. The EMS Committee will be composed of Upper Level Management from the NIH's Institutes and Centers (ICs). They will be responsible for concluding that a viable EMS is in place, and issuing an EMS self-declaration statement.

In addition to external self-declaration audits, the NIH will perform smaller, internal audits on an annual basis. A range of personnel from within NIH who have experience in the environmental field, facilities, maintenance, operations, biomedical research, and ISO 14001 will conduct these audits. NIH auditors will be supplemented by contractor support as necessary.

- c. The results of the EMS audits will be documented and evaluated by the EMS Working Groups. All issues will involve an analysis of root cause and suggest appropriate corrective action. Audit results will be compiled into a report and sent to the NIH EMS Committee for their review and approval. The results will be readily available to HHS for reporting needs.
- d. The NIH will review this protocol for self-declaration at least every three years to ensure that it continues to encourage continual improvement, remains appropriate to the NIH's program and missions, and adapts to any changes in mission or programs.

	
Leonard Taylor, Jr. Acting Director Office of Research Facilities Development and Operations National Institutes of Health	Date